



**DEPARTMENT OF PERSONNEL**

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(775) 684-0150  
[www.state.nv.us/personnel/](http://www.state.nv.us/personnel/)

**MEMO PERD #23/03**

July 11, 2003

TO: Department Directors  
Agency Administrators

FROM: Jeanne Greene, Director  
Department of Personnel

SUBJECT: Employee Training Survey

A handwritten signature in black ink, appearing to read "Jeanne Greene", is written over the "FROM" line of the memo.

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This is to request your agency's support in the distribution and completion of an employee training survey. This survey will provide us with valuable information regarding course offerings, along with other areas of improvement and expansion to provide effective and efficient learning opportunities for State employees.

The Department of Personnel Training Section in partnership with the Department of Business and Industry has recently developed and piloted the survey. With the successful completion of the pilot survey we are now ready for the next phase of the project, which is distribution of the survey to as many employees as possible. Thanks to the Department of Business and Industry the survey was designed in an electronic format that can be accessed through the Internet at <http://sptsurvey.nv.gov>.

On July 18<sup>th</sup> a notice will be distributed to all employees with their paychecks informing them of our survey request and the information required to complete the survey. The survey is designed to request specific feedback from employees and supervisors and/or managers. Those who have access to the Internet can complete the form electronically. For those who do not have direct access, a possible option may be that your agency sets up a central computer access point for those employees. If this is not possible, attached is a hardcopy form that can be reproduced and distributed for completion. Additionally, the notice informs employees that hardcopy forms will also be available in agency personnel offices. If reproducing copies is an issue, please contact one of the following employees for assistance:

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Mary Kauffman (North)	775-684-0136	<a href="mailto:mkauffman@dop.nv.gov">mkauffman@dop.nv.gov</a>
Elinor Webster (South)	702-486-2905	<a href="mailto:ewebster@dop.nv.gov">ewebster@dop.nv.gov</a>

If the resources are available in your agency, we would appreciate your help in distributing through a mass e-mail a second reminder to employees requesting completion of the survey. I believe the email distribution technique will prove to be more effective than the notice, although it is not available to us without your help. Below is the general text to include in your agency's email. You may want to add specific information pertaining to your agency.

Please help the Department of Personnel Training Section build your future training program by completing the on-line survey located at <http://sptsurvey.nv.gov>. The survey is designed to identify individual and agency training needs to provide the best training program possible.

Your opinion and viewpoints count. Please respond today!!! The survey will only be available through August 15, 2003.

If you have any questions or need help completing this survey, contact Mary Kauffman by phone at (775) 684-0136, or via email at [mkauffman@dop.nv.gov](mailto:mkauffman@dop.nv.gov).

If your agency would like a softcopy of this text sent to you via email, please contact Mary Kauffman by phone at (775) 684-0136, or email at [mkauffman@dop.nv.gov](mailto:mkauffman@dop.nv.gov).

We look forward to working with you to reach the end goal of providing State employees with improved training services and programs. If you have any questions please feel free to contact our Training Manager, John Hastings, by phone at (775) 687-4122, or email at [jhastings@dop.nv.gov](mailto:jhastings@dop.nv.gov).

JG:cp

Attachment

cc: Agency Personnel Liaisons  
Agency Personnel Representatives

Department of Personnel  
Administrative Services Division  
Training Section

TRAINING NEEDS SURVEY FOR EMPLOYEES  
Please complete and return no later than 8/15/2003

Introduction

Please provide your name and email address. This information will be used for tracking purposes only and will not be included with survey answers.

Name: \_\_\_\_\_

Email: \_\_\_\_\_

Agency: \_\_\_\_\_

Do you supervise any employees? Please check yes or no. Yes                      No

PART ONE:

1. How do you prefer to learn topic information? Please rank the following methods in order of preference with "1" indicating the most preferred and "5" indicating the least preferred

Instructor-led (classroom)

Instructor-led, on-line learning

Self-paced on-line (e-learning)

Self-paced CD/DVD/Video/Diskette

Distance learning using videoconferencing

## PART TWO

For each of the courses listed below, please indicate the skill level of training that would best meet your need. If no need exists, leave blank.

TRAINING CATEGORY	INTRODUCTORY (Basic Information)	INTERMEDIATE (Guided Practice)	ADVANCED (Practicum)
<b>Basic Supervision:</b>			
Coaching			
Decision Making			
Delegating Work			
Leadership			
Employee Assistance Program			
Managing Meetings			
Motivating Employees			
Performance Management			
Team Building			
<b>Communication:</b>			
Giving and Receiving Feedback			
Improving Grammar			
Developing Listening Skills			
Promoting Open Communication			
Public Speaking			
Resolving Conflict			
Understanding Styles			
Writing (Business)			
Writing (Reports)			
<b>Customer Service:</b>			
Addressing Customer Needs			
Dealing With Upset Customers			
Electronic Mail Etiquette			
Office Etiquette			
Telephone Etiquette			
<b>Federal and State Laws:</b>			
A.I.D.S./H.I.V. Policy			
Employee Appraisal			
Family Medical Leave Act			
Progressive Discipline			
Worker's Compensation Issues			

	INTRODUCTORY (Basic Information)	INTERMEDIATE (Guided Practice)	ADVANCED (Practicum)
<b>Individual Growth/Development:</b>			
Critical Thinking Skills			
Dealing With Change			
Managing Stress			
Setting and Achieving Goals			
Presenting a Positive Attitude			
<b>Management:</b>			
Budgeting			
Ethical Considerations			
Organizational Development			
Personnel Management			
Project Management			
Statistical Analysis			
Strategic Planning			
<b>Recruitment and Selection:</b>			
Recruitment Options (Mgmt)			
Determining Essential Functions			
Developing Interview Questions			
Conducting a Legal Interview			
Making a Selection			
<b>Technical Skills:</b>			
Microsoft Access Software			
Microsoft Excel Software			
Microsoft Outlook			
Microsoft PowerPoint Software			
Microsoft Word Software			

Please list any additional training topics for which you have a need. For each item you identify, indicate the skill level that you would require. If you have more than three suggestions, please attach a separate sheet.

Training Topic	Introductory (Basic Information)	Intermediate (Guided Practice)	Advanced (Practicum)

This concludes the survey for employees who are not supervisors or managers. Thank you for your participation. To ensure that your input is included in our curriculum assessment, please forward this form to:

Department of Personnel/Training Section  
Attention: Mary Kauffman

If you are a supervisor or manager, please continue.

Department of Personnel  
Administrative Services Division/Training Section

**TRAINING NEEDS SURVEY FOR MANAGER AND SUPERVISORS**

Please complete and return no later than 8/15/2003

**PART THREE**

Please provide your name and email address. This information will be used for tracking purposes only and will not be included with survey answers.

1. Name: \_\_\_\_\_
2. Email: \_\_\_\_\_
3. How many employees do you supervise? (numbers only) \_\_\_\_\_
4. How many of your employees are required to maintain a license/certificate for their position? \_\_\_\_\_
5. Please list the licensing or certifying entity(s):  
Name: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

**PART FOUR**

Please respond to the following items by checking the box(s) that apply:

1. What learning methodology do you prefer for your employees. Please rank the following methods in order of preference with "1" indicating the most preferred and "5" indicating the least preferred.  
\_\_\_\_\_ Instructor-led (classroom)      \_\_\_\_\_ Instructor-led, on-line learning  
\_\_\_\_\_ Self-paced on-line (e-learning)      \_\_\_\_\_ Self-paced CD/DVD/Video/Diskette  
\_\_\_\_\_ Distance learning using videoconferencing
2. Which month(s) are most convenient for you to send employees to training?  
\_\_\_\_\_ January      \_\_\_\_\_ April      \_\_\_\_\_ July      \_\_\_\_\_ October  
\_\_\_\_\_ February      \_\_\_\_\_ May      \_\_\_\_\_ August      \_\_\_\_\_ November  
\_\_\_\_\_ March      \_\_\_\_\_ June      \_\_\_\_\_ September      \_\_\_\_\_ December  
\_\_\_\_\_ None
3. What day(s) of the week is/are most convenient for you to send employees to training?  
\_\_\_\_\_ Monday      \_\_\_\_\_ Tuesday      \_\_\_\_\_ Wednesday      \_\_\_\_\_ Thursday      \_\_\_\_\_ Friday
4. What is the best time to start training classes for your employees?  
\_\_\_\_\_ 8:00 a.m.      \_\_\_\_\_ 1:00 p.m.      Other \_\_\_\_\_  
\_\_\_\_\_ 8:30 a.m.      \_\_\_\_\_ 1:30 p.m.

5. For classes that are longer than 4 hours, I prefer my employees attend:

- \_\_\_\_\_ Multiple half-day training sessions  
\_\_\_\_\_ Full-day training sessions  
\_\_\_\_\_ Consecutive full-day training sessions

## PART FIVE

Refresher training for managers and supervisors will be added to the Nevada Administrative Code training requirements. The type of training and length of the training has yet to be determined. We are seeking your input.

Directions: Please check the box that reflects your needs for the training topics listed.

REFRESHER TRAINING	No need	Some need	Great need
Interview and Hiring			
Work Standards and Employee Appraisal			
Sexual Harassment			
Alcohol and Drug Testing			
Principles of Effective Communication			
Coaching			
Equal Employment Opportunity			
Progressive Discipline/Grievances			
Application of Communications Principles			
How many days should this training be?			

If Refresher Training is required every two years, how many hours should this training be?

Please list any additional training topics you have for Refresher Training. If you have more than three suggestions, please attach a separate sheet.

Training Topic

Thank you for participating. To ensure that your input is included in our curriculum assessment, please forward this form to:

Department of Personnel/Training Section  
Attention: Mary Kauffman